Civ. 05-236

## CIVIL CASE FILING STATEMENT

····(Two-Party Cases)

	Please <u>check</u> the cas	e type you are filing:	
CIV:	Tort Contract Name Change Foreign Judgment Administrative App Habeas Corpus Other Writ  Other	peal Condemnation	Claim and Delivery Forcible Entry & Detainer
DIV:	Divorce* Annulment* Separate	Maintenance*	
SMC:	Small Claims		
	Complete a form for <u>each</u> ada	litional Plaintiff or De	efendant
Plainti	iff: South Dakota Public Utilities  Last/Business name	Commission First	Middle Suffix
	Address: 500 East Capitol Ave.	11101	Middle Sullix
		State: SD	7.ip. 57501
	Date of Birth: NA mm dd yyyy		
	Social Security #: and	nd/or Drivers license#	State
	Attorney: Smith Last	John First	J.  Middle Suffix
	Address: 500 East Capitol Ave.	Phone: (60	5) 773-3201
		State: SD	
Defe	ndant: Sumption  Last/ Business name  Address: 39452 Country Drive	Les First	S. Middle Suffix
	City: Bath	State: SD	Zip: 57427
	Date of Birth: $\frac{6}{mm}$ $\frac{27}{dd}$ $\frac{1960}{yyyy}$		
	Social Security #: <u>504</u> - <u>94</u> - <u>0036</u> a	nd/or Drivers license #	State
	Employer ID (if Defendant is a business or otl	ner entity)	
	Attorney: Burke Last	John First	W. Middle Suffix
	Address: PO Box 100	Phone: (60	5) 723-8000
	City: Belle Fourche	State: SD	Zip: <u>57717</u>

<sup>\*</sup>For cases involving divorce, child support, and paternity, you must include your Social Security Number. 42 USC 666(a)(13)(B).

## CIVIL CASE FILING STATEMENT

(Two-Party Cases)

	Please <u>check</u> the ca	se type you are filing:		
CIV:	Tort Contract Name Change Foreign Judgment Administrative A Habeas Corpus Other Writ ✓ Ot	Paternity* Quiet Title ppeal Condemnation her	Claim and Forcible Entry	Delivery & Detainer
DIV:	Divorce* Annulment* Separat	e Maintenance*		
SMC:	Small Claims			
	Complete a form for <u>each</u> ad	lditional Plaintiff or De	efendant	
Plaint	iff: Last/ Business name	First	Middle	Suffix
	Address:		171100110	Cana
	City:		Zip:	
	Date of Birth: ddyyyy		1	
	Social Security #:	and/or Drivers license #		State
	Employer ID (if Plaintiff is a business or other	er entity)		
	A.U			
	Attorney:Last	First	Middle	Suffix
	Address:	Phone:		
	City:	State:	Zip:	
Defe	ndant: Swearingen  Last/ Business name	Matt First	R. Middle	Suffix
•	Address: 135 Campbell Ave.			
	City: Stratford	State: SD	Zip: <u>574</u>	74
	Date of Birth: $\frac{7}{\text{mm}} = \frac{22}{\text{dd}} = \frac{65}{\text{yyyy}}$			
	Social Security #: <u>504</u> - <u>90</u> - <u>5607</u>	and/or Drivers license #		State
	Employer ID (if Defendant is a business or o	other entity)		
	Attorney: Burke Last	John First	W. Middle	Suffix
	Address: PO Box 100	Phone: (60	5) 723-8000	
	City: Belle Fourche	State: SD	Zip: 577	17

<sup>\*</sup>For cases involving divorce, child support, and paternity, you must include your Social Security Number. 42 USC 666(a)(13)(B).

## CIVIL CASE FILING STATEMENT

## (Two=Party Cases) Please check the case type you are filing: Tort Contract Name Change Paternity\* Quiet Title Claim and Delivery Foreign Judgment Administrative Appeal Condemnation Forcible Entry & Detainer CIV: Habeas Corpus Other Writ ✓ Other DIV: Divorce\* \_\_\_Annulment\* \_\_\_Separate Maintenance\* Small Claims SMC: Complete a form for each additional Plaintiff or Defendant Plaintiff: \_\_\_\_\_ Last/ Business name First Middle Suffix Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Date of Birth: \_\_\_\_\_\_ mm dd yyyy Social Security #: \_\_\_\_\_ and/or Drivers license # \_\_\_\_\_ State Employer ID (if Plaintiff is a business or other entity) Attorney: \_\_\_\_\_ Middle Suffix Last First Address: \_\_\_\_\_ Phone: \_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_ Defendant: S&S Communications Last/Business name First Middle Suffix Address: none City: \_\_\_\_\_ State: \_\_\_\_ Zip: Date of Birth: \_\_\_\_ dd yyyy Social Security #: \_\_\_\_ - \_\_\_ and/or Drivers license #\_\_\_\_ State Employer ID (if Defendant is a business or other entity) Attorney: Burke John Last First Middle Suffix Address: PO Box 100 Phone: (605) 723-8000

City: Belle Fourche State: SD Zip: 57717

<sup>\*</sup>For cases involving divorce, child support, and paternity, you must include your Social Security Number. 42 USC 666(a)(13)(B).